



GOMBE STATE REPORT (Q2 2015 – Q2 2016)

Major Developments

- Data quality and management is a high-level priority for the Gombe Primary Health Care Development Agency (GPHCDA) and the EU-SIGN State Team Assistant (STA) is actively involved in increasing skills and quality reporting.
- The STA regularly participates in supervision visits and provides direct on-the-job training to health workers.
- A renovation in 1 cold store facility (Shomgom LGA) and 1 new cold store construction (Nafada) is on-going.



Source: STA Team

Key Personnel and Telephone Numbers

| | | |
|-------------------------------|------------------------------|---------------------------------------|
| State Commissioner for Health | Dr. Ishaya Kennedy | +234 (0)8024263067, +234(0)8065539571 |
| Secretary, SPHCDA | Dr. Ahmed Mohammed Gana, SA | +234 (0)8037861783 |
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Total Population: 3,225,382

Population 0-11 months: 128,014

| | | | |
|------------------|------|---------------------------|-----|
| LGAs | 11 | Hospitals | 23 |
| Wards | 114 | Mission Hospitals | 7 |
| Health Districts | 70 | PHC Centres | 344 |
| | | Private Health Facilities | 70 |
| Communities | 6229 | Health Posts | 135 |

Background

Gombe State is in the North-East Zone of Nigeria and EU-SIGN activities began there in April 2015. The project was officially launched on 21 July 2016.

Gombe State has a highly functioning State Primary Health Care Development Agency (SPHCDA), with a performance ranking of 82% against Primary Health Care Under One Roof (PHCUOR). The GPHCDA scores strongest on Governance and Ownership; System Development and Operational Guidelines. The STA works closely with the GPHCDA to strengthen the weaker scoring areas of legislation and the Minimum Service Package.

Gombe State has a strong immunisation performance with coverage of all antigens over 80% in 2014 and over 90% in 2015. In 2015 and 2016, the State reported high levels of fixed and outreach sessions planned and achieved. Gombe State introduced inactivated poliovirus (IPV) vaccine in March 2015 and will introduce pneumococcal conjugate vaccine (PCV) in July 2016. In July 2016, Gombe State reported Pentavalent 3 coverage of 139%; OPV3 coverage of 140% and 135% IPV coverage. Despite the high coverage, some LGAs have large numbers of unimmunised children. This is a result of the high influx of internally displaced persons (IDPs) into the State from neighbouring States where insecurity is high.

Integrated Supportive Supervision (ISS) visits are an opportunity to assess the performance at LGA and health facility level. It is also an opportunity to provide on-the-job training and update health workers on current practices. The STA in Gombe State participated regularly in supervision visits and has found:

- Vaccines are available at the State, LGA and health facility levels. However, there is the risk of some vaccines being damaged at lower levels due to inadequate or dysfunctional cold chain equipment.
- Funding for vaccine collection and transportation is often unavailable for outreach sessions.
- Data management tools are largely available at LGA level, but documentation needs strengthening.
- Health workers and supervisors need training on immunisation and vaccine management practices.

Other systemic issues include lack of funding for transportation to distribute vaccines and conduct outreach or supervision visits; there is a shortage of technical staff at the health facility level and the State cold store is too small. A cold store started by EU-PRIME has not been completed. Waste management is generally done by burn and bury.

Data management, quality and ownership are concerns for the GPHCDA. At the start of EU-SIGN, data tools needed harmonisation, skills needed updating and there was insufficient funding for a monitoring and evaluation (M&E) department at the GPHCDA. There was also insufficient IT equipment to help with analysis and record keeping. Donors and other agencies were managing the health data, the data from LGA level was often of poor quality, health workers had not received updated training and staff have been transferred. The M&E Department was revived in August 2015 and a Head of Department engaged and works closely with the STA.

The Social Mobilisation Department in Gombe is weak despite its relevance to Routine Immunisation (RI) and polio eradication. While meetings are held at the LGA level with Ward Development Committees (WDC), Civil Society Organisations (CSO) and Village Development Committees (VDC), they are often not held at State-level due to lack of funding. Funding is also a concern at the LGA level. Meetings with WDCs, CSOs and VDCs were carried out during supervisory visits at the LGAs to help build community engagement. Clear RI messages are only passed through health talks in the HFs, posters and hand bills.

EU-SIGN Activities in Gombe State

- EU-SIGN works closely with the GPHCDA to improve data management in the State, a key concern for the agency. EU-SIGN supported training on Data Quality Supportive Supervision (DQUSS) on 6-7 May 2016 for LGA M&E Officers, Local Immunisation Officers (LIO), and GPHCDA staff to improve knowledge on new data tools; improve data quality; improve record keeping and reporting; to mitigate parallel reporting to donors agencies and reduce multiplicity of tools.
- EU-SIGN is involved in supporting polio eradication activities; including planning, monitoring, advocacy visits and monitoring Immunisation Plus Days (IPD). He provided technical guidance to the Gombe team during the polio vaccine switch from trivalent to bivalent OPV. The STA has also supported and helped prepare for Maternal, Newborn and Child Health weeks in the State and provided technical guidance to Integrated Measles Campaigns.
- The STA participates in ISS visits in the State, which is an important opportunity to observe performance, review data, provide on-the-job training and assess the condition of the cold chain. It is also an opportunity to review community engagement activities.
- EU-SIGN is involved in most State-level training related to immunisation. The STA has facilitated training on vaccine management and on PCV introduction, and is involved in IPD trainings. He did in-house training of senior supervisors and conducts extensive on-the-job training during ISS to health facilities, including on cold chain and vaccine management, microplanning, using monitoring charts, waste management and data management.
- EU-SIGN works closely with the state social mobilisation stakeholders to strategise ways community participation and advocacy can be improved when there is little funding. Training for Social Mobilisation Officers on supportive supervision, service delivery and demand creation would help strengthen social mobilisation in the State.
- A renovation in one cold store facility and one new cold store construction is on-going (See table below).

EU-SIGN Supported Equipment, Construction and Renovation Works in Edo State

| EU-SIGN PROJECT SUPPORT AND PROJECT IN GOMBE STATE - UPDATED AUGUST 2016 | | | | | |
|--|---|-----|-------------------------------|-------------------|--|
| | | | August 2016 Exchange Rate: | 339.9548 | |
| S/N | ITEMS | Qty | Unit Cost in Euro | Amount in Euro | Comments |
| | SUPPLY | | | | |
| 1 | Vehicle 4WD | 1 | 31,210 | 31,210 | inspection done, expecting the delivery anytime from now |
| 2 | Computer systems | 4 | 1,252 | 5,007 | Yet deliver to be done before 7 of October, 2016 |
| | SUB-TOTAL SUPPLY COST | | | 36,217 | |
| | WORKS / CONSTRUCTION / RENOVATION OF COLD STORES AND HEALTH FACILITIES | | | | |
| | CONSTRUCTION | | | | |
| 1 | Nafada (Cold Store) | 1 | 88,403 | 88,403 | |
| | RENOVATION | | | | |
| 2 | Shomgom LGA (Cold Store) | 1 | 51,345 | 51,345 | |
| | SUB-TOTAL WORKS COST | | | 139,747 | |
| | GRAND TOTAL IN EURO | | | 175,965 | |
| | GRAND TOTAL EQUIVALENT IN NAIRA | | | 59,820,124 | |